

## Application Data Sheet

### Application Information

<b>Application number:</b>	10/586,160
<b>International Filing Date:</b>	January 14, 2005
<b>Application Type:</b>	Regular
<b>Subject Matter:</b>	Utility
<b>Suggested Classification:</b>	
<b>Suggested Group Art Unit:</b>	
<b>CD-ROM or CD-R:</b>	None
<b>Number of CD Disks:</b>	
<b>Number of copies of CDs:</b>	
<b>Sequence Submission?</b>	
<b>Computer Readable Form (CRF)?</b>	
<b>Number of Copies of CRF:</b>	
<b>Title:</b>	VARIABLE CONFIGURATION APPARATUS
<b>Attorney Docket Number:</b>	IVJM-0003
<b>Request for Early Publication:</b>	No
<b>Request for Non-Publication:</b>	No
<b>Suggested Drawing Figure:</b>	
<b>Total Drawing Sheets:</b>	
<b>Small Entity?:</b>	No
<b>Latin name:</b>	
<b>Variety denomination name:</b>	
<b>Petition included?:</b>	No
<b>Petition Type:</b>	
<b>Licensed US Govt. Agency:</b>	
<b>Contract or Grant Numbers:</b>	
<b>Secrecy Order in Parent Appl.?:</b>	No

## Applicant Information

<b>Applicant Authority Type:</b>	Inventor
<b>Primary Citizenship Country:</b>	GREAT BRITAIN
<b>Status:</b>	Full Capacity
<b>Given Name:</b>	Peter
<b>Middle Name:</b>	
<b>Family Name:</b>	SYMONS
<b>Name Suffix:</b>	
<b>City of Residence:</b>	Workingham
<b>State or Province of Residence:</b>	Berkshire
<b>Country of Residence:</b>	UNITED KINGDOM
<b>Street of mailing address:</b>	
<b>City of mailing address:</b>	
<b>State or Province of mailing address:</b>	
<b>Country of mailing address:</b>	
<b>Postal or Zip Code of mailing address:</b>	

<b>Applicant Authority Type:</b>	Inventor
<b>Primary Citizenship Country:</b>	GREAT BRITAIN
<b>Status:</b>	Full Capacity
<b>Given Name:</b>	Timothy
<b>Middle Name:</b>	
<b>Family Name:</b>	WARD
<b>Name Suffix:</b>	
<b>City of Residence:</b>	Chesham
<b>State or Province of Residence:</b>	Buckinghamshire
<b>Country of Residence:</b>	UNITED KINGDOM
<b>Street of mailing address:</b>	
<b>City of mailing address:</b>	
<b>State or Province of mailing address:</b>	
<b>Country of mailing address:</b>	
<b>Postal or Zip Code of mailing address:</b>	

<b>Applicant Authority Type:</b>	Inventor
<b>Primary Citizenship Country:</b>	GREAT BRITAIN
<b>Status:</b>	Full Capacity
<b>Given Name:</b>	Ian
<b>Middle Name:</b>	
<b>Family Name:</b>	KEEN
<b>Name Suffix:</b>	
<b>City of Residence:</b>	Yateley
<b>State or Province of Residence:</b>	Hampshire
<b>Country of Residence:</b>	UNITED KINGDOM
<b>Street of mailing address:</b>	
<b>City of mailing address:</b>	
<b>State or Province of mailing address:</b>	
<b>Country of mailing address:</b>	
<b>Postal or Zip Code of mailing address:</b>	

<b>Applicant Authority Type:</b>	Inventor
<b>Primary Citizenship Country:</b>	GREAT BRITAIN
<b>Status:</b>	Full Capacity
<b>Given Name:</b>	Kevin
<b>Middle Name:</b>	
<b>Family Name:</b>	LAMACRAFT
<b>Name Suffix:</b>	
<b>City of Residence:</b>	Teddington
<b>State or Province of Residence:</b>	Middlesex
<b>Country of Residence:</b>	UNITED KINGDOM
<b>Street of mailing address:</b>	
<b>City of mailing address:</b>	
<b>State or Province of mailing address:</b>	
<b>Country of mailing address:</b>	
<b>Postal or Zip Code of mailing address:</b>	

<b>Applicant Authority Type:</b>	Inventor
<b>Primary Citizenship Country:</b>	GREAT BRITAIN
<b>Status:</b>	Full Capacity
<b>Given Name:</b>	Richard
<b>Middle Name:</b>	
<b>Family Name:</b>	UNDERWOOD
<b>Name Suffix:</b>	
<b>City of Residence:</b>	Reading
<b>State or Province of Residence:</b>	Berkshire
<b>Country of Residence:</b>	UNITED KINGDOM
<b>Street of mailing address:</b>	
<b>City of mailing address:</b>	
<b>State or Province of mailing address:</b>	
<b>Country of mailing address:</b>	
<b>Postal or Zip Code of mailing address:</b>	

## Correspondence Information

<b>Correspondence Customer No.:</b>	23377
<b>Name:</b>	WOODCOCK WASHBURN LLP
<b>Street of Mailing Address:</b>	2929 Arch Street, 12 <sup>th</sup> Floor
<b>City of Mailing Address:</b>	Philadelphia
<b>State or Province of Mailing Address:</b>	Pennsylvania
<b>Country of Mailing Address:</b>	United States of America
<b>Postal or Zip Code of Mailing Address:</b>	19104
<b>Phone number:</b>	215.568.3100
<b>Fax number:</b>	215.568.3439

## Representative Information

<b>Representative Customer No.:</b>	23377
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## Domestic Priority Information

<b>Application:</b>	<b>Continuity Type:</b>	<b>Parent Application:</b>	<b>Parent Filing Date:</b>

## Foreign Priority Information

<b>Country:</b>	<b>Application No.:</b>	<b>Filing Date:</b>	<b>Priority Claimed:</b>
Great Britain	0400805.8	January 14, 2004	Yes
Great Britain	0402588.8	February 5, 2004	Yes
Great Britain	0410242.2	May 7, 2004	Yes

## Assignee Information

<b>Assignee name:</b>	
<b>Street of mailing address:</b>	
<b>City of mailing address:</b>	
<b>State or Province of mailing address:</b>	
<b>Country of mailing address:</b>	
<b>Postal or Zip Code of mailing address:</b>	